



General Assembly

Amendment

February Session, 2010

LCO No. 4585

SB0005204585SD0

Offered by:

SEN. CRISCO, 17th Dist.

REP. FONTANA, 87th Dist.

To: Subst. Senate Bill No. 52

File No. 5

Cal. No. 39

"AN ACT CONCERNING A TASK FORCE TO STUDY HEALTH CARE FOR UNINSURED CHILDREN."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. Section 19a-712 of the 2010 supplement to the general
4 statutes is repealed and the following is substituted in lieu thereof
5 (*Effective from passage*):

6 (a) The SustiNet Health Partnership board of directors shall design
7 and establish implementation procedures to implement the SustiNet
8 Plan. The SustiNet Plan shall be designed to (1) improve the health of
9 state residents; (2) improve the quality of health care and access to
10 health care; (3) provide health insurance coverage to Connecticut
11 residents who would otherwise be uninsured; (4) increase the range of
12 health care insurance coverage options available to residents and
13 employers; (5) slow the growth of per capita health care spending both
14 in the short-term and in the long-term; and (6) implement reforms to

15 the health care delivery system that will apply to all Sustinet Plan
16 members, provided any such reforms to health care coverage provided
17 to state employees, retirees and their dependents shall be subject to
18 applicable collective bargaining agreements.

19 (b) The Sustinet Health Partnership board of directors shall offer
20 recommendations to the General Assembly on the governance
21 structure of the entity that is best suited to provide oversight and
22 implementation of the Sustinet Plan. Such recommendations may
23 include, but need not be limited to, the establishment of a public
24 authority authorized and empowered:

25 (1) To adopt guidelines, policies and regulations in accordance with
26 chapter 54 that are necessary to implement the provisions of sections
27 19a-710 to 19a-723, inclusive;

28 (2) To contract with insurers or other entities for administrative
29 purposes, such as claims processing and credentialing of providers.
30 Such contracts shall reimburse these entities using "per capita" fees or
31 other methods that do not create incentives to deny care. The selection
32 of such insurers or other entities may take into account their capacity
33 and willingness to (A) offer timely networks of participating providers
34 both within and outside the state, and (B) help finance the
35 administrative costs involved in the establishment and initial operation
36 of the Sustinet Plan;

37 (3) To solicit bids from individual providers and provider
38 organizations and to arrange with insurers and others for access to
39 existing or new provider networks, and take such other steps to
40 provide all Sustinet Plan members with access to timely, high-quality
41 care throughout the state and, in appropriate cases, care that is outside
42 the state's borders;

43 (4) To establish appropriate deductibles, standard benefit packages
44 and out-of-pocket cost-sharing levels for different providers, that may
45 vary based on quality, cost, provider agreement to refrain from balance
46 billing Sustinet Plan members, and other factors relevant to patient

47 care and financial sustainability;

48 (5) To commission surveys of consumers, employers and providers
49 on issues related to health care and health care coverage;

50 (6) To negotiate on behalf of providers participating in the Sustinet
51 Plan to obtain discounted prices for vaccines and other health care
52 goods and services;

53 (7) To make and enter into all contracts and agreements necessary or
54 incidental to the performance of its duties and the execution of its
55 powers under its enabling legislation, including contracts and
56 agreements for such professional services as financial consultants,
57 actuaries, bond counsel, underwriters, technical specialists, attorneys,
58 accountants, medical professionals, consultants, bio-ethicists and such
59 other independent professionals or employees as the board of directors
60 shall deem necessary;

61 (8) To purchase reinsurance or stop loss coverage, to set aside
62 reserves, or to take other prudent steps that avoid excess exposure to
63 risk in the administration of a self-insured plan;

64 (9) To enter into interagency agreements for performance of
65 Sustinet Plan duties that may be implemented more efficiently or
66 effectively by an existing state agency;

67 (10) To set payment methods for licensed health care providers that
68 reflect evolving research and experience both within the state and
69 elsewhere, promote access to care and patient health, prevent
70 unnecessary spending, and ensure sufficient compensation to cover the
71 reasonable cost of furnishing necessary care;

72 (11) To appoint such advisory committees as may be deemed
73 necessary for the public authority to successfully implement the
74 Sustinet Plan, further the objectives of the public authority and secure
75 necessary input from various experts and stakeholder groups;

76 (12) To establish and maintain an Internet web site that provides for

77 timely posting of all public notices issued by the public authority or
78 the board of directors and such other information as the public
79 authority or board deems relevant in educating the public about the
80 SustiNet Plan;

81 (13) To evaluate the implementation of an individual mandate in
82 concert with guaranteed issue, the elimination of preexisting condition
83 exclusions, and the implementation of auto-enrollment;

84 (14) To apply for and receive federal funds and raise funds from
85 private and public sources outside of the state budget to contribute
86 toward support of its mission and operations;

87 (15) To make optimum use of opportunities created by the federal
88 government for securing new and increased federal funding,
89 including, but not limited to, increased reimbursement revenues;

90 (16) In the event of the enactment of federal health care reform, to
91 submit preliminary recommendations for the implementation of the
92 SustiNet Plan to the General Assembly not later than sixty days after
93 the date of enactment of such federal health care reform; and

94 (17) To study the feasibility of funding premium subsidies for
95 individuals with income that exceeds three hundred per cent of the
96 federal poverty level but does not exceed four hundred per cent of the
97 federal poverty level.

98 (c) Not later than January 1, 2011, the SustiNet Health Partnership
99 board of directors shall submit its design and implementation
100 procedures in the form of recommended legislation to the joint
101 standing committees of the General Assembly having cognizance of
102 matters relating to appropriations and the budgets of state agencies
103 and finance, revenue and bonding.

104 (d) The SustiNet Health Partnership board of directors shall study
105 the establishment of additional programs to provide health care to
106 uninsured children in this state and strategies to increase and expand

107 enrollment of uninsured children in this state in existing health care or
 108 health insurance programs. Such study shall include, but not be
 109 limited to, an examination of programs in other states that provide
 110 health care or health insurance coverage for uninsured children and
 111 strategies used in other states to increase and expand enrollment of
 112 uninsured children in existing health care or health insurance
 113 programs. Not later than January 1, 2011, the board shall submit a
 114 report on its findings and recommendations to the joint standing
 115 committees of the General Assembly having cognizance of matters
 116 relating to public health and insurance, in accordance with the
 117 provisions of section 11-4a.

118 [(d)] (e) All state and municipal agencies, departments, boards,
 119 commissions and councils shall fully cooperate with the board of
 120 directors in carrying out the purposes enumerated in this section."

This act shall take effect as follows and shall amend the following sections:		
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Section 1	<i>from passage</i>	19a-712
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